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CONFIRMATION NO. 1114

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/780,318	02/17/2004	435	1648	454313-2340.3
<b>RULE</b>				
<b>APPLICANTS</b> John Ellis, Saskatoon, CANADA; Gordon Moore Allan, Belfast, UNITED KINGDOM; Brian Meehan, Belfast, UNITED KINGDOM; Edward Clark, Saskatoon, CANADA; Deborah Haines, Saskatoon, CANADA; Lori Hassard, Saskatoon, CANADA; John Harding, Humboldt, CANADA; Catherine Elisabeth Charreyre, Saint-Laurent de Mure, FRANCE; Gilles Emile Chappuis, Lyon, FRANCE; George Steve Krakowka, Columbus, OH; Jean-Christophe Francis Audonnet, Lyon, FRANCE; Francis McNeilly, Newtonards, UNITED KINGDOM;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/680,228 10/06/2000 ABN which is a CIP of PCT/EP00/08781 08/28/2000 and is a CIP of 09/583,350 05/31/2000 PAT 6,517,843 which claims benefit of 60/151,564 08/31/1999 This application 10/780,318 is a CIP of 09/884,514 06/19/2001 PAT 6,660,272 which is a DIV of 09/161,092 09/25/1998 PAT 6,391,314 which is a CIP of 09/082,558 05/21/1998 PAT 6,368,601 <div style="text-align: right;">OK SBC</div>				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 98/00873 01/22/1998 FRANCE 98/03707 03/20/1998 FRANCE 97/12382 03/10/1997 <div style="text-align: right;">OK SBC</div>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/24/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>SBC</i>		STATE OR COUNTRY CANADA	SHEETS DRAWING 8	TOTAL CLAIMS 23
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 2		
<b>ADDRESS</b> William S. Frommer, Esq. c/o FROMMER LAWRENCE & HAUG LLP 745 Fifth Avenue New York, NY10151				
<b>TITLE</b> Prevention of myocarditis, abortion and intrauterine infection associated with porcine circovirus-2				

<b>FILING FEE RECEIVED</b> 1730	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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